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Page 1 of 41 Official Form 1 (1/08) Document **United States Bankruptcy Court Voluntary Petition** NORTHERN DISTRICT OF ILLINOIS Name of Debtor (if individual, enter Last, First, Middle): Name of Joint Debtor (Spouse)(Last, First, Middle) Thurman, Joseph Thurman, Anna L. All Other Names used by the Debtor in the last 8 years All Other Names used by the Joint Debtor in the last 8 years (include married, maiden, and trade names): (include married, maiden, and trade names): NONE NONE Last four digits of Soc. Sec. or Indvidual-Taxpayer I.D. (ITIN) No./Complete EIN Last four digits of Soc. Sec. or Indvidual-Taxpayer I.D. (ITIN) No./Complete EIN (if more than one, state all): 4153 (if more than one, state all): 0327 Street Address of Debtor (No. & Street, City, and State): Street Address of Joint Debtor (No. & Street, City, and State): 5909 W School 5909 W School Chicago IL Chicago IL ZIPCODE ZIPCODE **60634** 60634 County of Residence or of the County of Residence or of the Principal Place of Business: Principal Place of Business: Cook Cook Mailing Address of Joint Debtor Mailing Address of Debtor (if different from street address) (if different from street address): SAME ZIPCODE ZIPCODE Location of Principal Assets of Business Debtor
(if different from street address above): NOT APPLICABLE ZIPCODE (if different from street address above): **Nature of Business** Chapter of Bankruptcy Code Under Which Type of Debtor (Form of organization) (Check one box.) the Petition is Filed (Check one box) (Check one box.) Health Care Business Chapter 7 Chapter 15 Petition for Recognition П Chapter 9 of a Foreign Main Proceeding Single Asset Real Estate as defined See Exhibit D on page 2 of this form. П Chapter 11 in 11 U.S.C. § 101 (51B) ☐ Chapter 15 Petition for Recognition Corporation (includes LLC and LLP) П Chapter 12 Railroad of a Foreign Nonmain Proceeding Partnership Chapter 13 Stockbroker Other (if debtor is not one of the above Nature of Debts (Check one box) Commodity Broker entities, check this box and state type of Debts are primarily consumer debts, defined Debts are primarily entity below Clearing Bank in 11 U.S.C. § 101(8) as "incurred by an business debts. Other individual primarily for a personal, family, or household purpose" Tax-Exempt Entity Chapter 11 Debtors: (Check box, if applicable.) Check one box: Debtor is a tax-exempt organization Debtor is a small business as defined in 11 U.S.C. § 101(51D). under Title 26 of the United States Debtor is not a small business debtor as defined in 11 U.S.C. § 101(51D). Code (the Internal Revenue Code) Filing Fee (Check one box) Check if: Debtor's aggregate noncontingent liquidated debts (excluding debts owed Full Filing Fee attached to insiders or affiliates) are less than \$2,190,000. Filing Fee to be paid in installments (applicable to individuals only). Must attach signed application for the court's consideration certifying that the debtor is unable to pay fee except in installments. Rule 1006(b). See Official Form 3A. Check all applicable boxes: A plan is being filed with this petition Filing Fee waiver requested (applicable to chapter 7 individuals only). Must attach Acceptances of the plan were solicited prepetition from one or more signed application for the court's consideration. See Offi cial Form 3B. classes of creditors, in accordance with 11 U.S.C. § 1126(b). THIS SPACE IS FOR COURT USE ONLY Statistical/Administrative Information Debtor estimates that funds will be available for distribution to unsecured creditors. Debtor estimates that, after any exempt property is excluded and administrative expenses paid, there will be no funds available for distribution to unsecured creditors Estimated Number of Creditors 25.001- \boxtimes 1,000-5,001-10,001-50,001-100.000 50-99 100-199 200-999 Over 1-49 50.000 5,000 10.000 25.000 100,000 Estimated Assets \$0 to \$50,001 to \$100,001 to \$500,001 \$1,000,001 \$10,000,001 More than \$50,000,001 \$100,000,001 \$500,000,001 \$50,000 \$500,000 to \$10 to \$500 to \$1 billion \$1 billion \$100,000 to \$1 to \$50 to \$100 million million million million Estimated Liabilities \$500,001 \$0 to \$50,001 to \$100,001 to \$1,000,001 \$10,000,001 \$50,000,001 \$100,000,001 \$500,000,001 \$100,000 \$500,000 to \$10 to \$50 to \$100 to \$500 \$50,000 to \$1 to \$1 billion \$1 billion million million million million million

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Voluntary Petition (This page must be completed and filed in every case)	Name of Debtor(s): Joseph Thurman and	, ,
	Anna L. Thurman	
All Prior Bankruptcy Cases Filed Within Last 8 You Location Where Filed:	Case Number:	,
NONE	Case Number.	Date Filed:
Location Where Filed:	Case Number:	Date Filed:
Pending Bankruptcy Case Filed by any Spouse, Partner or Affiliate of	this Debtor (If more than one, at	ttach additional sheet)
Name of Debtor:	Case Number:	Date Filed:
NONE Districts	Dalotionahin	Tuday
District:	Relationship:	Judge:
Exhibit A (To be completed if debtor is required to file periodic reports (e.g., forms 10K and 10Q) with the Securities and Exchange Commission pursuant to Section 13 or 15(d) of the Securities Exchange Act of 1934 and is requesting relief under Chapter 11) Exhibit A is attached and made a part of this petition	(To be completed if whose debts are print I, the attorney for the petitioner named in the have informed the petitioner that [he or she] or 13 of title 11, United States Code, and have each such chapter. I further certify that I have required by 11 U.S.C. §342(b). X /s/ Beth A. Lehman	may proceed under chapter 7, 11, 12 we explained the relief available under the delivered to the debtor the notice 2/13/2009
	Signature of Attorney for Debtor(s) Exhibit C	Date
Does the debtor own or have possession of any property that poses or is alleg or safety? Yes, and exhibit C is attached and made a part of this petition. No	ged to pose a threat of imminent and identifiable Exhibit D	harm to public health
(To be completed by every individual debtor. If a joint petition is filed, each	spouse must complete and attach a separate Exl	nibit D.)
 Exhibit D completed and signed by the debtor is attached and made partition. Exhibit D also completed and signed by the joint debtor is attached and made partition. 		
	Regarding the Debtor - Venue k any applicable box)	
 Debtor has been domiciled or has had a residence, principal place of bus preceding the date of this petition or for a longer part of such 180 days the three is a bankruptcy case concerning debtor's affiliate, general partner, 	han in any other District.	days immediately
Debtor is a debtor in a foreign proceeding and has its principal place of business or assets in the United States but is a defendation the interests of the parties will be served in regard to the relief sought in	nt in an action proceeding [in a federal or state of	*
	Resides as a Tenant of Residential Property	<i>'</i>
Landlord has a judgment against the debtor for possession of debtor	applicable boxes.) or's residence. (If box checked, complete the follo	owing.)
	(Name of landlord that obtained judg	gment)
	(Address of landlord)	
Debtor claims that under applicable nonbankruptcy law, there are entire monetary default that gave rise to the judgment for possession		
Debtor has included with this petition the deposit with the court of period after the filing of the petition.	any rent that would become due during the 30-c	lay
☐ Debtor certifies that he/she has served the Landlord with this certif	fication. (11 U.S.C. § 362(l)).	

Voluntary Petition	Name of Debtor(s): Joseph Thurman and
(This page must be completed and filed in every case)	Anna L. Thurman
	Signatures
Signature(s) of Debtor(s) (Individual/Joint)	Signature of a Foreign Representative
I declare under penalty of perjury that the information provided in this petition is true and correct. [If petitioner is an individual whose debts are primarily consumer debts and has chosen to file under chapter 7] I am aware that I may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, understand the relief available under each such chapter, and choose to proceed under chapter 7.	I declare under penalty of perjury that the information provided in this petition is true and correct, that I am the foreign representative of a debtor in a foreign proceeding, and that I am authorized to file this petition. (Check only one box.)
[If no attorney represents me and no bankruptcy petition preparer signs the petition] I have obtained and read the notice required by 11 U.S.C. §342(b)	☐ I request relief in accordance with chapter 15 of title 11, United States Code. Certified copies of the documents required by 11 U.S.C. § 1515 are attached.
I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.	Pursuant to 11 U.S.C. § 1511, I request relief in accordance with the chapter of title 11 specified in this petition. A certified copy of the order granting recognition of the foreign main proceeding is attached.
${ m X}$ /s/ Joseph Thurman	- x
X /s/ Anna L. Thurman Signature of Joint Debtor	(Signature of Foreign Representative)
	(Printed name of Foreign Representative)
Telephone Number (if not represented by attorney)	2/13/2009
2/13/2009	(Date)
Date Signature of Attorney*	
X /s/ Beth A. Lehman Signature of Attorney for Debtor(s) Beth A. Lehman 1610465 Printed Name of Attorney for Debtor(s) Lehman and Fox Firm Name 6 East Monroe Address Suite 1004 Chicago IL 60603	Signature of Non-Attorney Bankruptcy Petition Preparer I declare under penalty of perjury that: (1) I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110; (2) I prepared this document for compensation and have provided the debtor with a copy of this document and the notices and information required under 11 U.S.C. § 110(b), 110(b), and 342(b); and, (3) if rules or guidelines have been promulgated pursuant to 11 U.S.C. § 110(h) setting a maximum fee for services chargeable by bankruptcy petition preparers, I have given the debtor notice of the maximum amount before preparing any document for filing for a debtor or accepting any fee from the debtor, as required in that section. Official Form 19 is attached.
312.332.4499	Printed Name and title, if any, of Bankruptcy Petition Preparer
Telephone Number 2/13/2009 Date *In a case in which § 707(b)(4)(D) applies, this signature also constitutes a certification that the attorney has no knowledge after	Social-Security number (If the bankruptcy petition preparer is not an individual, state the Social-Security number of the officer, principal, responsible person or partner of the bankruptcy petition preparer.) (Required by 11 U.S.C. § 110.)
an inquiry that the information in the schedules is incorrect.	Address
Signature of Debtor (Corporation/Partnership)	X
declare under penalty of perjury that the information provided in his petition is true and correct, and that I have been authorized to file this petition on behalf of the debtor.	Date Signature of bankruptcy petition preparer or officer, principal, responsible
The debtor requests the relief in accordance with the chapter of title 1, United States Code, specified in this petition.	person, or partner whose Social-Security number is provided above. Names and Social-Security numbers of all other individuals who prepared or assisted in preparing this document unless the bankruptcy petition preparer is
X Signature of Authorized Individual	not an individual.
Printed Name of Authorized Individual	If more than one person prepared this document, attach additional sheets conforming to the appropriate official form for each person.
Title of Authorized Individual	A bankruptcy petition preparer's failure to comply with the provisions of title 11
2/13/2009	and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both. 11 U.S.C. § 110; 18 U.S.C. § 156.

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B22A (Official Form 22A) (Chapter 7) (12/08)

In re Joseph	Thurman and Anna L. Thurman	According to the information required to be entered on this statement (check one box as directed in Part I, III, or VI of this
- <u> </u>	Debtor(s)	☐ The presumption arises.
		☐ The presumption does not arise.
Case Number:		☐ The presumption is temporarily inapplicable.
	(If known)	(Check the box as directed in Parts I, III, and VI of this statement.)

CHAPTER 7 STATEMENT OF CURRENT MONTHLY INCOME AND MEANS-TEST CALCULATION

In addition to Schedules I and J, this statement must be completed by every individual chapter 7 debtor, whether or not filing jointly. Unless the exclusion in Line 1C applies, joint debtors may complete a single statement. If the exclusion in Line 1C applies, each joint filer must complete a separate statement.

	Part I. MILITARY AND NON-CONSUMER DEBTORS
1A	Disabled Veterans. If you are a disabled veteran described in the Declaration in this Part IA, (1) check the box at the beginning of the Declaration, (2) check the box for "The presumption does not arise" at the top of this statement, and (3) complete the verification in Part VIII. Do not complete any of the remaining parts of this statement.
	Declaration of Disabled Veteran. By checking this box, I declare under penalty of perjury that I am a disabled veteran (as defined in 38 U.S.C. § 3741(1)) whose indebtedness occurred primarily during a period in which I was on active duty (as defined in 10 U.S.C. § 101(d)(1)) or while I was performing a homeland defense activity (as defined in 32 U.S.C. §901(1)).
1B	Non-consumer Debtors. If your debts are not primarily consumer debts, check the box below and complete the verification in Part VIII. Do not complete any of the remaining parts of this statement.
	Declaration of non-consumer debts. By checking this box, I declare that my debts are not primarily consumer debts.
1C	Reservists and National Guard Members; active duty or homeland defense activity. Members of a reserve component of the Armed Forces and members of the National Guard who were called to active duty (as defined in 10 U.S.C. § 101(d)(1)) after September 11, 2001, for a period of at least 90 days, or who have performed homeland defense activity (as defined in 32 U.S.C. § 901(1)) for a period of at least 90 days, are excluded from all forms of means testing during the time of active duty or homeland defense activity and for 540 days thereafter (the "exclusion period"). If you qualify for this temporary exclusion, (1) check the appropriate boxes and complete any required information in the Declaration of Reservists and National Guard Members below, (2) check the box for "The presumption is temporarily inapplicable" at the top of this statement, and (3) complete the verification in Part VIII. During your exclusion period you are not required to complete the balance of this form, but you must complete the form no later than 14 days after the date on which your exclusion period ends, unless the time for filling a motion raising the means test presumption expires in your case before your exclusion period ends. Declaration of Reservists and National Guard Members. By checking this box and making the appropriate entries below, I declare that I am eligible for a temporary exclusion from means testing because, as a member of a reserve component of the Armed Forces or the National Guard
	 a.

Part II. CALCULATION OF MONTHLY INCOME FOR § 707(b)(7) EXCLUSION Marital/filing status. Check the box that applies and complete the balance of this part of this statement as directed. a. Unmarried. Complete only Column A ("Debtor's Income") for Lines 3-11. b. Married, not filing jointly, with declaration of separate households. By checking this box, debtor declares under penalty of perjury: "My spouse and I are legally separated under applicable non-bankruptcy law or my spouse and I are living apart other than for the purpose of evading the requirements of § 707(b)(2)(A) of the Bankruptcy Code." Complete only Column A ("Debtor's Income") for Lines 3-11. c. Married, not filing jointly, without the declaration of separate households set out in Line 2.b above. Complete both 2 Column A ("Debtor's Income") and Column B ("Spouse's Income") for Lines 3-11. d. Married, filing jointly. Complete both Column A ("Debtor's Income") and Column B ("Spouse's Income") for Lines 3-11. All figures must reflect average monthly income received from all sources, derived during the six calendar Column A Column B months prior to filing the bankruptcy case, ending on the last day of the month before the filing. If the amount of monthly income varied during the six months, you must divide the six month total by six, and enter the Debtor's Spouse's result on the appropriate line. Income Income 3 \$0.00 \$4,160.00 Gross wages, salary, tips, bonuses, overtime, commissions. Income from the operation of a business, profession, or farm. Subtract Line b from Line a and enter the difference in the appropriate column(s) of Line 4. If you operate more than one business, profession or farm, enter aggregate numbers and provide details on an attachment. Do not enter a number less than zero. Do not include any part of the business expenses entered on Line b as a deduction in Part V. 4 \$0.00 a. Gross receipts b. Ordinary and necessary business expenses \$0.00 \$0.00 \$0.00 C. Business income Subtract Line b from Line a Subtract Line b from Line a and enter the difference Rent and other real property income. in the appropriate column(s) of Line 5. Do not enter a number less than zero. Do not include any part of the operating expenses entered on Line b as a deduction in Part V. 5 \$0.00 a. Gross receipts b. Ordinary and necessary operating expenses \$0.00 Subtract Line b from Line a C. Rent and other real property income \$0.00 \$0.00 6 \$0.00 Interest, dividends, and royalties. \$0.00 7 Pension and retirement income. \$0.00 \$0.00 Any amounts paid by another person or entity, on a regular basis, for the household expenses of the debtor or the debtor's dependents, including child support paid for that purpose. 8 Do not include alimony or separate maintenance payments or amounts paid by your spouse if Column B is \$0.00 \$0.00 icompleted. Unemployment compensation. Enter the amount in the appropriate column(s) of Line 9. However, if you contend that unemployment compensation received by you or your spouse was a benefit under the Social Security Act, do not list the amount of such compensation in 9 Column A or B, but instead state the amount in the space below: Unemployment compensation claimed to Debtor \$2,312.00 Spouse \$0.00 be a benefit under the Social Security Act \$0.00 \$0.00 Specify source and amount. If necessary, list additional sources on a Income from all other sources. Do not include alimony or separate maintenance payments paid by your spouse 10 if Column B is completed, but include all other payments of alimony or separate maintenance. Do not include any benefits received under the Social Security Act or payments received as a victim of a war crime, crime against humanity, or as a victim of international or domestic terrorism. 0 a. 0 Total and enter on Line 10 \$0.00 \$0.00 Subtotal of Current Monthly Income for § 707(b)(7). Add Lines 3 thru 10 in Column A, and, if Column B is completed, add Lines 3 through 10 in Column B. Enter the \$0.00 \$4,160.00 total(s). Total Current Monthly Income for § 707(b)(7). If Column B has been completed, 12 add Line 11. Column A to Line 11. Column B. and enter the total. If Column B has not been \$4.160.00 completed, enter the amount from Line 11, Column A.

Part III. APPLICATION OF § 707(b)(7) EXCLUSION				
13	Annualized Current Monthly Income for § 707(b)(7). Multiply the amount from Line 12 by the number 12 and enter the result.	\$49,920.00		
14	Applicable median family income. Enter the median family income for the applicable state and household size. (This information is available by family size at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.) a. Enter debtor's state of residence: ILLINOIS b. Enter debtor's household size: 4	\$78,182.00		
15	Application of Section 707(b)(7). Check the applicable box and proceed as directed. The amount on Line 13 is less than or equal to the amount on Line 14. Check the box for "The presumption does not arise" at the top of page 1 of this statement, and complete Part VIII; do not complete Parts IV, V, VI, or VII. The amount on Line 13 is more than the amount on Line 14. Complete the remaining parts of this statement.			

Complete Parts IV, V, VI, and VII of this statement only if required. (See Line 15).

16	Enter the amount from Line 12.		\$
	Column B that was NOT paid on a regular basis for the dependents. Specify in the lines below the basis for ex spouse's tax liability or the spouse's support of person	e 2.c, enter on Line 17 the total of any income listed in Line 11, ne household expenses of the debtor or the debtor's xcluding the Column B income (such as payment of the ns other than the debtor or the debtor's dependents) and the eary, list additional adjustments on a separate page. If you did	
17	a. b.	\$ \$	
17			
17	b.	\$]]] s

	Part V. CALCULAT	ION OF DEDUCTIONS FROM INCOME			
	Subpart A: Deductions under	Standards of the Internal Revenue Service	(IRS)		
19A	National Standards: food, clothing, and other items Standards for Food, Clothing and Other Items for the www.usdoj.gov/ust/ or from the clerk of the bankru	applicable household size. (This information is available at	\$		
19B	National Standards: health care. Enter in Line a1 below the amount from IRS National Standards for Out-of-Pocket Health Care for persons under 65 years of age, and in Line a2 the IRS National Standards for Out-of-Pocket Health Care for persons 65 years of age or older. (This information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.) Enter in Line b1 the number of members of your household who are under 65 years of age, and enter in Line b2 the number of members of your household who are 65 years of age or older. (The total number of household members must be the same as the number stated in Line 14b.) Multiply Line a1 by Line b1 to obtain a total amount for household members under 65, and enter the result in Line c1. Multiply Line a2 by Line b2 to obtain a total amount for household members 65 and older, and enter the result in Line c2. Add Lines c1 and c2 to obtain a total health care amount, and enter the result in Line 19B.				
	Household members under 65 years of age	Household members 65 years of age or older			
	a1. Allowance per member	a2. Allowance per member			
	b1. Number of members	b2. Number of members			
	c1. Subtotal	c2. Subtotal	\$		
20A	Local Standards: housing and utilities; non-mor IRS Housing and Utilities Standards; non-mortgage (This information is available at www.usdoj.gov/ust/ o	xpenses for the applicable county and household size.	\$		

20B	Local Standards: housing and utilities; mortgage/rent expenses. Enter, in Line a below, the amount of the IRS Housing and Utilities Standards; mortgage/rent expense for your county and household size (this information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court); enter on Line b the total of the Average Monthly Payments for any debts secured by your home, as stated in Line 42; subtract Line b from Line a and enter the result in Line 20B. Do not enter an amount less than zero.					
200	a.	IRS Housing and Utilities Standards; mortgage/rental expense		\$	П	
	b.	Average Monthly Payment for any debts secured by your				
		home, if any, as stated in Line 42		\$		
	C.	Net mortgage/rental expense		Subtract Line b from Line a.	_	\$
21	Lines Hous	Local Standards: housing and utilities; adjustment. If you contend that the process set out in Lines 20A and 20B does not accurately compute the allowance to which you are entitled under the IRS Housing and Utilities Standards, enter any additional amount to which you contend you are entitled, and state the basis for your contention in the space below: \$\$\$\$\$\$\$				
	You a	I Standards: transportation; vehicle operation/public transportare entitled to an expense allowance in this category regardless of what a vehicle and regardless of whether you use public transportation.	nether you pay			
22A	exper	k the number of vehicles for which you pay the operating expenses on ses are included as a contribution to your household expenses in Li \square 1 \square 2 or more.		e operating		
		checked 0, enter on Line 22A the "Public Transportation" amount fronce the checked 1 or 2 or more, enter on Line 22A the "Operating Costs" and				
		sportation for the applicable number of vehicles in the applicable Meton. (These amounts are available at www.usdoj.gov/ust/ or from the				\$
		I Standards: transportation; additional public transportation e	-	If you pay the operating expenses		
22B	for a vehicle and also use public transportation, and you contend that you are entitled to an additional deduction for your public transportation expenses, enter on Line 22B the "Public Transportation" amount from IRS Local Standards: Transportation. (This amount is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.)				\$	
	of vel	I Standards: transportation ownership/lease expense; Vehicle nicles for which you claim an ownership/lease expense. (You may nonse for more than two vehicles.)		ck the number ership/lease		
	1	2 or more.				
		r, in Line a below, the "Ownership Costs" for "One Car" from the IRS		·		
23	Montl	able at www.usdoj.gov/ust/ or from the clerk of the bankruptcy countries has stated in Line 4 and enter the result in Line 23. Do not enter an amount less	2; subtract Lin	S S		
		IRS Transportation Standards, Ownership Costs	\$			
		Average Monthly Payment for any debts secured by Vehicle 1, as stated in Line 42	\$			\$
	C.	Net ownership/lease expense for Vehicle 1		e b from Line a.		
		al Standards: transportation ownership/lease expense; Vehicle plete this Line only if you checked the "2 or more" Box in Line 23.	2.			
		r, in Line a below, the "Ownership Costs" for "One Car" from the IRS	Local Standar	ds: Transportation		
		able at www.usdoj.gov/ust/ or from the clerk of the bankruptcy con				
		verage Monthly Payments for any debts secured by Vehicle 2, as sta Line a and enter the result in Line 24. Do not enter an amount le				
24	a.	IRS Transportation Standards, Ownership Costs	,55 triair ZGIU.	· \$		
	b.	Average Monthly Payment for any debts secured by Vehicle 2,		•	-	
		as stated in Line 42		\$		
	C.	Net ownership/lease expense for Vehicle 2		Subtract Line b from Line a.		\$

25	Other Necessary Expenses: taxes. Enter the total average monthly expense that you actually incur for all federal, state and local taxes, other than real estate and sales taxes, such as income taxes, self employment taxes, social-security taxes, and Medicare taxes. Do not include real estate or sales taxes.				
26	Other Necessary Expenses: mandatory payroll deductions for employment. Enter the total average monthly payroll deductions that are required for your employment, such as retirement contributions, union dues, and uniform costs. Do not include discretionary amounts, such as voluntary 401(k) contributions.				
27	Other Necessary Expenses: life insurance. Enter total average monthly premiums that you actually pay for term life insurance for yourself. Do not include premiums for insurance on your dependents, for whole life or for any other form of insurance.				
28	Other Necessary Expenses: court-ordered payments. Enter the total monthly amount that you are required to pay pursuant to the order of a court or administrative agency, such as spousal or child support payments. Do not include payments on past due support obligations included in Line 44.				
29	Other Necessary Expenses: education for employment or for a physically or mentally challenged child. Enter the total average monthly amount that you actually expend for education that is a condition of employment and for education that is required for a physically or mentally challenged dependent child for whom no public education providing similar services is available.				
30		Necessary Expenses: childca are - such as baby-sitting, day ca		\$	
31	Other Necessary Expenses: health care. Enter the total average monthly amount that you actually expend on health care that is required for the health and welfare of yourself or your dependents, that is not reimbursed by insurance or paid by a health savings account, and that is in excess of the amount entered in Line 19B.				
Do not include payments for health insurance or health savings accounts listed in Line 34. Other Necessary Expenses: telecommunication services. Enter the total average monthly amount that you actually pay for telecommunication services other than your basic home telephone and cell phone service such as pagers, call waiting, caller id, special long distance, or internet service to the extent necessary for your health and welfare or that of your dependents. Do not include any amount previously deducted.				\$	
33	Total Expenses Allowed under IRS Standards. Enter the total of Lines 19 through 32			\$	
		Subpa	art B: Additional Living Expense Deductions	L	
		Note: Do not inc	clude any expenses that you have listed in Lines 19-32		
		Insurance, Disability Insuran			
		Insurance, Disability Insuran	clude any expenses that you have listed in Lines 19-32 nce and Health Savings Account Expenses. List the monthly expenses in the at are reasonably necessary for yourself, your spouse, or your dependents.		
	catego	Insurance, Disability Insuran	clude any expenses that you have listed in Lines 19-32 ace and Health Savings Account Expenses. List the monthly expenses in the		
34	catego a.	Insurance, Disability Insuran ries set out in lines a-c below that Health Insurance	clude any expenses that you have listed in Lines 19-32 nce and Health Savings Account Expenses. List the monthly expenses in the at are reasonably necessary for yourself, your spouse, or your dependents.		
34	a. b.	Insurance, Disability Insuran ries set out in lines a-c below that Health Insurance Disability Insurance	clude any expenses that you have listed in Lines 19-32 nce and Health Savings Account Expenses. List the monthly expenses in the at are reasonably necessary for yourself, your spouse, or your dependents. \$ \$	\$	
34	a. b. c. Total	Insurance, Disability Insurances set out in lines a-c below that Health Insurance Disability Insurance Health Savings Account and enter on Line 34	clude any expenses that you have listed in Lines 19-32 nce and Health Savings Account Expenses. List the monthly expenses in the at are reasonably necessary for yourself, your spouse, or your dependents. \$ \$	\$	
34	a. b. c. Total	Insurance, Disability Insuran ries set out in lines a-c below that Health Insurance Disability Insurance Health Savings Account and enter on Line 34	clude any expenses that you have listed in Lines 19-32 nee and Health Savings Account Expenses. List the monthly expenses in the at are reasonably necessary for yourself, your spouse, or your dependents. \$ \$ \$ \$	\$	
34	a. b. c. Total If you space	Insurance, Disability Insurances set out in lines a-c below the Health Insurance Disability Insurance Health Savings Account and enter on Line 34 u do not actually expend this to below:	clude any expenses that you have listed in Lines 19-32 nee and Health Savings Account Expenses. List the monthly expenses in the at are reasonably necessary for yourself, your spouse, or your dependents. \$ \$ \$ \$	\$	
34	a. b. C. Total If you space \$ Contir monthlelderly.	Insurance, Disability Insurance set out in lines a-c below the Health Insurance Disability Insurance Health Savings Account and enter on Line 34 a do not actually expend this abelow: Disability Insurance Health Savings Account and enter on Line 34 a do not actually expend this abelow:	clude any expenses that you have listed in Lines 19-32 nce and Health Savings Account Expenses. at are reasonably necessary for yourself, your spouse, or your dependents. \$ \$ \$ total amount, state your actual total average monthly expenditures in the	\$	
	a. b. c. Total If you space \$ Contir monthl elderly unable Protectincurre	Health Insurance Disability Insurance Health Insurance Disability Insurance Health Savings Account and enter on Line 34 u do not actually expend this repely expenses that you will continue, chronically ill, or disabled member to pay for such expenses.	clude any expenses that you have listed in Lines 19-32 Ince and Health Savings Account Expenses. List the monthly expenses in the at are reasonably necessary for yourself, your spouse, or your dependents. \$ total amount, state your actual total average monthly expenditures in the actual amount, state your actual total average monthly expenditures in the actual actual actual actual average actual actual actual actual and necessary care and support of an		

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38	Education expenses for dependent children less than 18. Enter the total average monthly expenses that you actually incur, not to exceed \$137.50 per child, for attendance at a private or public elementary or secondary school by your dependent children less than 18 years of age. You must provide your case trustee with documentation of your actual expenses, and you must explain why the amount claimed is reasonable and necessary and not already accounted for in the IRS Standards.					\$	
39	Additional food and clothing expense. Enter the total average monthly amount by which your food and clothing expenses exceed the combined allowances for food and clothing (apparel and services) in the IRS National Standards, not to exceed 5% of those combined allowances. (This information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.) You must demonstrate that the additional amount claimed is reasonable and necessary.						
40	Continued charitable contributions. Enter the amount that you will continue to contribute in the form of cash or financial instruments to a charitable organization as defined in 26 U.S.C. § 170(c)(1)-(2).						
41	Total .	Additional Expense Ded	uctions under § 707(b). Enter the to	tal of Lines 34 through 40)	\$	
			Subpart C: Deductions for	or Debt Payment			
	you ow Payme total of filing o	ent, and check whether the f all amounts scheduled as if the bankruptcy case, divi al of the Average Monthly l	ditor, identify the property securing the determinent includes taxes or insurance. The contractually due to each Secured Credit ded by 60. If necessary, list additional enterpayments on Line 42.	ot, state the Average Mon e Average Monthly Paymo or in the 60 months follow	othly ent is the ving the		
		Name of Creditor	Property Securing the Debt	Average Monthly Payment	Does payment include taxes or insurance?		
42	a.			\$	☐ yes ☐no		
	b.			\$	☐ yes ☐no		
	C.			\$	☐ yes ☐no		
	d.			\$	☐ yes ☐no		
	e.			\$	☐ yes ☐no		
				Total: Add Lines a - e		\$	
	Other payments on secured claims. If any of the debts listed in Line 42 are secured by your primary residence, a motor vehicle, or other property necessary for your support or the support of your dependents, you may include in your deduction 1/60th of any amount (the "cure amount") that you must pay the creditor in addition to the payments listed in Line 42, in order to maintain possession of the property. The cure amount would include any sums in default that must be paid in order to avoid repossession or foreclosure. List and total any such amounts in the following chart. If necessary, list additional entries on a separate page.						
43	a.	Name of Creditor	Property Securing the Debt	1/60th of the Cure	Amount		
	b.			\$			
	C.			\$			
	d.			\$			
	e.			\$			
				Total: Add Lines a	- e	\$	
44	as pric	•	ity claims. Enter the total amount, alimony claims, for which you were liable at these set out in Line 28	divided by 60, of all priori at the time of your bankru	•	•	

		101111 22A) (Gliapter 1) (12/00) - 0011t.		•		
	the fo	oter 13 administrative expenses. If you are eligible to file a case oblowing chart, multiply the amount in line a by the amount in line b, and instrative expense.				
	a.	Projected average monthly Chapter 13 plan payment.	\$			
45	b.	Current multiplier for your district as determined under schedules issued by the Executive Office for United States Trustees. (This information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.)	х			
	C.	Average monthly administrative expense of Chapter 13 case	Total: Multiply Lines a and b	\$		
46	Tota	Deductions for Debt Payment. Enter the total of Lines 42 through	igh 45.	\$		
		Subpart D: Total Deduction	ons from Income			
47	Tota	of all deductions allowed under § 707(b)(2). Enter the total	of Lines 33, 41, and 46.	\$		
		Part VI. DETERMINATION OF § 7	07(b)(2) PRESUMPTION			
48	Ente	r the amount from Line 18 (Current monthly income for § 707(b)((2))	\$		
49	Ente	r the amount from Line 47 (Total of all deductions allowed under	§ 707(b)(2))	\$		
50	Monthly disposable income under § 707(b)(2). Subtract Line 49 from Line 48 and enter the result					
51	60-month disposable income under § 707(b)(2). Multiply the amount in Line 50 by the number 60 and enter the result.					
	Initia	I presumption determination. Check the applicable box and pro	oceed as directed.			
52	☐ The amount on Line 51 is less than \$6,575 Check the box for "The presumption does not arise" at the top of page 1 of this statement, and complete the verification in Part VIII. Do not complete the remainder of Part VI. ☐ The amount set forth on Line 51 is more than \$10,950. Check the box for "The presumption arises" at the top of page 1 of this statement, and complete the verification in Part VIII. You may also complete Part VII. Do not complete the remainder of Part VI.					
	☐ The amount on Line 51 is at least \$6,575, but not more than \$10,950. Complete the remainder of Part VI (Lines 53 through 55).					
53	Enter the amount of your total non-priority unsecured debt					
54	Threshold debt payment amount. the result. Multiply the amount in Line 53 by the number 0.25 and enter			\$		
	Seco	indary presumption determination. Check the applicable box	and proceed as directed.			
55	☐ The amount on Line 51 is less than the amount on Line 54. Check the box for "The presumption does not arise" at the top of page 1 of this statement, and complete the verification in Part VIII. ☐ The amount on Line 51 is equal to or greater than the amount on Line 54. Check the box for "The presumption arises" at the top of page 1 of this statement, and complete the verification in Part VIII. You may also complete Part VII.					
		PART VII. ADDITIONAL EX	KPENSE CLAIMS			
	healtl mont	r Expenses. List and describe any monthly expenses, not otherwise in and welfare of you and your family and that you contend should be an hily income under § 707(b)(2)(A)(ii)(I). If necessary, list additional sour average monthly expense for each item. Total the expenses.	n additional deduction from your current ces on a separate page. All figures should reflect			
56		Expense Description	Monthly Amount			
	a.		\$			
	b. c.		\$			
	U.		Ψ			

Total: Add Lines a, b, and c

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UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS EASTERN DIVISION

In re	$\it Joseph$	Thurman		Case No.	
11110	and			Chapter	7
	Anna L	. Thurman			
			/ Debtor		
	Attorney for	Debtor: Beth A. Lehman			

STATEMENT PURSUANT TO RULE 2016(B)

The undersigned, pursuant to Rule 2016(b), Bankruptcy Rules, states that:

- 1. The undersigned is the attorney for the debtor(s) in this case.
- 2. The compensation paid or agreed to be paid by the debtor(s), to the undersigned is:
- 3. \$ 299.00 of the filing fee in this case has been paid.
- 4. The Services rendered or to be rendered include the following:
 - a) Analysis of the financial situation, and rendering advice and assistance to the debtor(s) in determining whether to file a petition under title 11 of the United States Code.
 - b) Preparation and filing of the petition, schedules, statement of financial affairs and other documents required by the court.
 - c) Representation of the debtor(s) at the meeting of creditors.
- 5. The source of payments made by the debtor(s) to the undersigned was from earnings, wages and compensation for services performed, and

None other

6. The source of payments to be made by the debtor(s) to the undersigned for the unpaid balance remaining, if any, will be from earnings, wages and compensation for services performed, and

None other

7. The undersigned has received no transfer, assignment or pledge of property from debtor(s) except the following for the value stated:

None

8. The undersigned has not shared or agreed to share with any other entity, other than with members of undersigned's law firm, any compensation paid or to be paid except as follows:

None

Dated: 2/13/2009 Respectfully submitted,

X/s/ Beth A. Lehman

Attorney for Petitioner: Beth A. Lehman
Lehman and Fox
6 East Monroe
Suite 1004
Chicago IL 60603
312.332.4499

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In re Joseph Thurman and Anna L. Thurman	, Case No
Debtor(s)	(if known)

SCHEDULE A-REAL PROPERTY

Except as directed below, list all real property in which the debtor has any legal, equitable, or future interest, including all property owned as a cotenant community property, or in which the debtor has a life estate. Include any property in which the debtor holds rights and powers exercisable for the debtor's own benefit. If the debtor is married, state whether the husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor holds no interest in real property, write "None" under "Description and Location of Property."

Do not include interests in executory contracts and unexpired leases on this schedule. List them in Schedule G-Executory Contracts and Unexpired Leases.

If an entity claims to have a lien or hold a secured interest in any property, state the amount of the secured claim. See Schedule D. If no entity claims to hold a secured interest in the property, write "None" in the column labeled "Amount of Secured Claim."

If the debtor is an individual or if a joint petition is filed, state the amount of any exemption claimed in the property only in Schedule C - Property Claimed as Exempt.

Description and Location of Property	Nature of Debtor's Interest in Property	HusbandI Wife\ Joint Community	N Deducting any Secured Claim or	Amount of Secured Claim
residence 5909 W School	Co-tenancy		\$ 300,000.00	\$ 262,811.00
time share	Co-tenancy		\$ 3,000.00	\$ 1,200.00

TOTAL \$ (Report also on Summary of Schedules.)

303,000.00

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In re Joseph Thurman and Anna L. I	Thurman	Case No.	
Debtor(s)		·	(if known

SCHEDULE B-PERSONAL PROPERTY

Except as directed below, list all personal property of the debtor of whatever kind. If the debtor has no property in one or more of the categories, place an "x" in the appropriate position in the column labeled "None." If additional space is needed in any category, attach a separate sheet properly identified with the case name, case number, and the number of the category. If the debtor is married, state whether the husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor is an individual or a joint petition is filed, state the amount of any exemptions claimed only in Schedule C - Property Claimed as Exempt.

Do not list interests in executory contracts and unexpired leases on this schedule. List them in Schedule G-Executory Contracts and Unexpired Leases.

If the property is being held for the debtor by someone else, state that person's name and address under "Description and Location of Property." If the property is being held for a minor child, simply state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

Type of Property	N o n		lusbandH WifeW JointJ nmunityC	Secured Claim or
Cash on hand.	X			
Checking, savings or other financial accounts, certificates of deposit, or shares in banks, savings and loan, thrift, building and loan, and homestead associations, or credit unions, brokerage houses, or cooperatives.		checking acct LaSalle Location: In debtor's possession	J	\$ 20.00
Security deposits with public utilities, telephone companies, landlords, and	X			
others. 4. Household goods and furnishings, including audio, video, and computer equipment.		furniture Location: In debtor's possession	ت	\$ 500.00
Books, pictures and other art objects, antiques, stamp, coin, record, tape, compact disc, and other collections or collectibles.	x			
6. Wearing apparel.		clothing Location: In debtor's possession	J	\$ 300.00
7. Furs and jewelry.		wedding ring Location: In debtor's possession	J	\$ 200.00
Firearms and sports, photographic, and other hobby equipment.	x			
Interests in insurance policies. Name insurance company of each policy and itemize surrender or refund value of each.	x			
Annuities. Itemize and name each issuer.	X			
11. Interest in an education IRA as defined in 26 U.S.C. 530(b)(1) or under a qualified State tuition plan as defined in 26 U.S.C. 529(b)(1). Give particulars. (File separately the record(s) of any such interest(s). 11 U.S.C. 521(c).)	X			

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In re	Joseph Thurman and Anna L. Thurman	Case No	
	Debtor(s)	(if know	wr

SCHEDULE B-PERSONAL PROPERTY

(Continuation Sheet)

		(Continuation Chect)			
Type of Property	N	Description and Location of Property			Current Value of Debtor's Interest,
	o n e		Husband Wife Joint mmunity	-W -J	in Property Without Deducting any Secured Claim or Exemption
12. Interests in IRA, ERISA, Keogh, or other pension or profit sharing plans. Give particulars.		401k Location: In debtor's possession		J	\$ 10,000.00
Stock and interests in incorporated and unincorporated businesses. Itemize.	x				
14. Interests in partnerships or joint ventures. Itemize.	X				
Government and corporate bonds and other negotiable and non-negotiable instruments.	X				
16. Accounts Receivable.	X				
Alimony, maintenance, support, and property settlements to which the debtor is or may be entitled. Give particulars.	X				
Other liquidated debts owed to debtor including tax refunds. Give particulars.	X				
Equitable or future interests, life estates, and rights or powers exercisable for the benefit of the debtor other than those listed in Schedule of Real Property.	X				
Contingent and non-contingent interests in estate of a decedent, death benefit plan, life insurance policy, or trust.	X				
21. Other contingent and unliquidated claims of every nature, including tax refunds, counterclaims of the debtor, and rights to setoff claims. Give estimated value of each.	X				
22. Patents, copyrights, and other intellectual property. Give particulars.	X				
23. Licenses, franchises, and other general intangibles. Give particulars.	X				
24. Customer lists or other compilations containing personally identifiable information (as described in 11 U.S.C. 101(41A)) provided to the debtor by individuals in connection with obtaining a product or service from the debtor primarily for personal, family, or household purposes.	X				
25. Automobiles, trucks, trailers and other vehicles and accessories.		01 Blazer Location: In debtor's possession		J	\$ 4,000.00
		97 Malibu Location: In debtor's possession		J	\$ 1,200.00

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In re Joseph Thurman and Anna L.	Thurman	Case No.	
Debtor(s)		_	(if known

SCHEDULE B-PERSONAL PROPERTY

(Continuation Sheet)

-		(
Type of Property	N o n		oand Wife Joint	.W -J	Current Value of Debtor's Interest, in Property Without Deducting any Secured Claim or Exemption
	е	Comm	unity	Ċ	Exemption
26. Boats, motors, and accessories.	X				
27. Aircraft and accessories.	X				
28. Office equipment, furnishings, and supplies.	X				
29. Machinery, fixtures, equipment and supplies used in business.	X				
30. Inventory.	X				
31. Animals.	X				
32. Crops - growing or harvested. Give particulars.	X				
33. Farming equipment and implements.	X				
34. Farm supplies, chemicals, and feed.	X				
35. Other personal property of any kind not already listed. Itemize.	X				
	1				

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nre Joseph Thurman and Anna L. Thurm	an Case No.
Debtor(s)	, (if known

SCHEDULE C-PROPERTY CLAIMED AS EXEMPT

Debtor claims the exemptions to which debtor is entitled under:

Check if debtor claims a homestead exemption that exceeds \$136,875.

(Check one box)

☐ 11 U.S.C. § 522(b) (2) ☑ 11 U.S.C. § 522(b) (3)

Description of Property	Specify Law Providing each Exemption	Value of Claimed Exemption	Current Value of Property Without Deducting Exemptions
residence	735 ILCS 5/12-901	\$ 16,035.00	\$ 300,000.00
time share Sheridan IL	735 ILCS 5/12-1001(b)	\$ 1,800.00	\$ 3,000.00
furniture	735 ILCS 5/12-1001(b)	\$ 500.00	\$ 500.00
wedding ring	735 ILCS 5/12-1001(b)	\$ 200.00	\$ 200.00
401k	735 ILCS 5/12-1006	\$ 2,000.00	\$ 10,000.00
01 Blazer	735 ILCS 5/12-1001(c)	\$ 3,600.00	\$ 4,000.00
97 Malibu	735 ILCS 5/12-1001(c)	\$ 1,200.00	\$ 1,200.00

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B6D (Official Form 6D) (12/07)

In re Joseph Thurman and Anna L. Thurman	, Case No.
Debtor(s)	(if known)

SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number of all entities holding claims secured by property of the debtor as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. List creditors holding all types of secured interests such as judgment liens, garnishments, statutory liens, mortgages, deeds of trust, and other security interests.

List creditors in alphabetical order to the extent practicable. If a minor child is the creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). If all secured creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H – Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Total the columns labeled "Amount of Claim Without Deducting Value of Collateral" and "Unsecured Portion, if Any" in the boxes labeled "Total(s)" on the last sheet of the completed schedule. Report the total from the column labeled "Amount of Claim Without Deducting Value of Collateral" also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report the total from the column labeled "Unsecured Portion, if Any" on the Statistical Summary of Certain Liabilities and Related Data.

Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

Creditor's Name and Mailing Address Including ZIP Code and Account Number (See Instructions Above.)	Co-Debtor	O' V H W- J	ate Claim was Incurred, Nature f Lien, and Description and Market alue of Property Subject to Lien Husband -Wife Joint Community	Contingent	Unliquidated	Disputed	Amount of Claim Without Deducting Value of Collateral	Unsecured Portion, If Any
Account No: 1723		_	02				\$ 218,400.00	\$ 0.00
Creditor # : 1 American Home Mortgage PO Box 660029 Dallas TX 75266			first mortgage first mortgage Value: \$ 300,000.00	_				
Account No: 6600		J	04				\$ 44,411.00	\$ 0.00
Creditor # : 2 Chase Manhattan Mtge PO Box 9001020 Louisville KY 40290-1054			Second Mortgage second mortgage					
			Value: \$ 300,000.00					
Account No: 6022 Creditor # : 3 Kay Jewelers PO Box 740425 Cincinnati OH 45274-0425		W	wedding ring				\$ 488.00	\$ 288.00
			Value: \$ 200.00					
1 continuation sheets attached			S (Tota (Use only	Т	is pa ota	ige) I \$	\$ 263,299.00 (Report also on Summary of	\$ 288.00

Schedules.)

Statistical Summary of Certain Liabilities and Related Data) Case 09-04702 Doc 1 Filed 02/13/09 Entered 02/13/09 15:16:15 Desc Main Document Page 19 of 41

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In re Joseph Thurman and Anna L. Thurman	_, Case No.	
Debtor(s)		(if known)

SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS

(Continuation Sheet) **Amount of Claim** Unsecured Date Claim was Incurred, Nature Creditor's Name and **Mailing Address** Without of Lien, and Description and Market Portion, If Any Unliquidated Including ZIP Code and Contingent Value of Property Subject to Lien **Deducting Value** Disputed **Account Number** of Collateral H--Husband (See Instructions Above.) W--Wife J--Joint C--Community \$ 0.00 \$ 1,200.00 Account No: J 02 Creditor # : 4 time share Silver Leaf Resort time share 1 week, Sheridan IL 1221 River Bend #120 Dallas TX 75247 Value: \$ 3,000.00 Account No: Value: of 1 Sheet no. 1 continuation sheets attached to Schedule of Creditors Subtotal \$ \$ 1,200.00 \$ 0.00 (Total of this page Holding Secured Claims Total \$ \$ 264,499.00 \$ 288.00 (Use only on last page)

(Report also on Summary of Schedules.)

(If applicable, report also on Statistical Summary of Certain Liabilities and Related Data) B6E (Official Form 6E) (1207) 09-04702 Doc 1 Filed 02/13/09 Entered 02/13/09 15:16:15 Desc Main Page 20 of 41 Document

In re Joseph Thurman and Anna L. Thurman

Debtor(s)

Case No.

(if known)

SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

A complete list of claims entitled to priority, listed separately by type of priority, is to be set forth on the sheets provided. Only holders of unsecured claims entitled to priority should be listed in this schedule. In the boxes provided on the attached sheets, state the name, mailing address, including zip code, and last four digits of the account number, if any, of all entities holding priority claims against the debtor or the property of the debtor, as of the date of the filing of the petition. Use a separate continuation sheet for each type of priority and label each with the type of priority.

The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H-Codebtors. If a joint petition is filed, state whether the husband, wife, both of them or the

conti	tal community may be liable on each claim by placing an "H", "W", "J", or "C" in the column labeled "Husband, Wife, Joint, or Community." If the claim is ingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is uted, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)
box l	Report the total of claims listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all claims listed on this Schedule E in the labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules.
•	Report the total of amounts entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts entitled to ity listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts rt this total also on the Statistical Summary of Certain Liabilities and Related Data.
	Report the total of amounts NOT entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts not led to priority listed on this Schedule E in the box labeled "Total" on the last sheet of the completed schedule. Individual debtors with primarily consumers report this total also on the Statistical Summary of Certain Liabilities and Related Data.
\boxtimes	Check this box if debtor has no creditors holding unsecured priority claims to report on this Schedule E.
TYP	PES OF PRIORITY CLAIMS (Check the appropriate box(es) below if claims in that category are listed on the attached sheets)
	Domestic Support Obligations Claims for demestic support that are owed to or recoverable by a spouse, former spouse, or child of the debtor, or the parent, legal guardian, or responsible relative of such a child, or a governmental unit to whom such a domestic support claim has been assigned to the extent provided in 11 U.S.C. § 507(a)(1).
	Extensions of credit in an involuntary case Claims arising in the ordinary course of the debtor's business or financial affairs after the commencement of the case but before the earlier of the appointment of a trustee or the order for relief. 11 U.S.C. § 507(a)(3).
	Wages, salaries, and commissions Wages, salaries, and commissions, including vacation, severance, and sick leave pay owing to employees and commissions owing to qualifying independent sales representatives up to \$10,950* per person earned within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(4).
	Contributions to employee benefit plans Money owed to employee benefit plans for services rendered within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(5).
	Certain farmers and fishermen Claims of certain farmers and fishermen, up to \$5,400* per farmer or fisherman, against the debtor, as provided in 11 U.S.C. § 507(a)(6).
	Deposits by individuals Claims of individuals up to \$2,425* for deposits for the purchase, lease, or rental of property or services for personal, family, or household use, that were not delivered or provided. 11 U.S.C. § 507(a)(7).
	Taxes and Certain Other Debts Owed to Governmental Units Taxes, customs duties, and penalties owing to federal, state, and local governmental units as set forth in 11 U.S.C. § 507(a)(8).
	Commitments to Maintain the Capital of an Insured Depository Institution Claims based on commitments to FDIC, RTC, Director of the Office of Thrift Supervision, Comptroller of the Currency, or Board of Governors of the Federal Reserve System, or their predecessors or successors, to maintain the capital of an insured depository institution. 11 U.S.C. § 507(a)(9).
	Claims for Death or Personal Injury While Debtor Was Intoxicated Claims for death or personal injury resulting from the operation of a motor vehicle or vessel while the debtor was intoxicated from using alcohol, a drug, or another substance. 11 U.S.C. § 507(a)(10).

^{*}Amounts are subject to adjustment on April 1, 2010, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

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B6F (Official Form 6F) (12/07)

In re_ Joseph Thurman and Anna L. Thurman	, Case No.	
Debtor(s)	-	(if known)

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number, of all entities holding unsecured claims without priority against the debtor or the property of the debtor, as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). Do not include claims listed in Schedules D and E. If all creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report total of all claims listed on this schedule in the box labeled "Total" on the last sheet of the completed schedules. Report this total also on the Summary of Schedules, and, if the debtor is an individual with primarily consumer debts, report this total also on the Statistical Summary of Certain Liabilities and Related Data.

☐ Check this box if debtor has no creditors holding unsecured claims to report on this Schedule F.

Creditor's Name, Mailing Address including Zip Code, And Account Number (See instructions above.)	Co-Debtor	JJ	Date Claim was Incurred, and Consideration for Claim. If Claim is Subject to Setoff, so State. Husband Wife oint Community	Contingent	Unliquidated	Disputed	Amount of Claim
Account No: 8650 Creditor # : 1 Capital One POB 30285 SLC UT 84130-0285		J	2/2006 Credit Card Purchases				\$ 2,129.00
Account No: 6755 Creditor # : 2 Chase PO Box 15298 Wilmington DE 19850-5298		J	1/2006 Credit Card Purchases				\$ 6,018.00
Account No: 6132 Creditor # : 3 Discover PO Box15192 Wilmington DE 19850-5192		J	1/2006 Credit Card Purchases				\$ 8,356.00
Account No: 5103 Creditor # : 4 DrS Bonded PO Box 498609 Cincinnati OH 45249-8609		H	Medical				\$ 7,438.00
2 continuation sheets attached	•			Sub	tota Tota	٠,	\$ 23,941.00

(Use only on last page of the completed Schedule F. Report also on Summary of Schedules and, if applicable, on the Statistical Summary of Certain Liabilities and Related Data)

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B6F (Official Form 6F) (12/07) - Cont.

In re Joseph Thurman and Anna L. Thurman	,
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Case No.____

Debtor(s)

(if known)

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

Creditor's Name, Mailing Address including Zip Code, And Account Number (See instructions above.) Account No: 4333 Creditor # : 5 Jacobson Orthodontic Associate 4200 W. Peterson Ave	Co-Debtor	JJ	Date Claim was Incurred, and Consideration for Claim. If Claim is Subject to Setoff, so State. usband Vife bint ommunity 1/2006 Medical bill	Contingent	Unliquidated	Disputed	Amount of Claim \$ 150.00
Account No: 5159 Creditor # : 6 Menards PO Box 15521 Wilmington DE 19850		J	1/2006 Credit Card Purchases				\$ 1,918.00
Account No: 6913 Creditor # : 7 Northwestern Medical Faculty F 38693 Eagle Way Chicago IL 60678-1031		W	Medical				\$ 750.00
Account No: Creditor # : 8 Northwestern Memorial Hospital Patient Financial 251 E Huron Chicago IL 60611-2908		J	06 Medical				\$ 900.00
Account No: 4325 Creditor # : 9 Parkview Dental Care 4020 N Central AVe Chicago IL 60634		J	1/2006 Medical bill				\$ 32.00
Account No: 7781 Creditor # : 10 Retail Services POB 17298 Baltimore MD 21297-1298		J	Credi card debt for business				\$ 3,996.00
Sheet No. 1 of 2 continuation sheets attacceditors Holding Unsecured Nonpriority Claims	ched t	o So	nedule of (Use only on last page of the completed Schedule F. Report also on Summ and, if applicable, on the Statistical Summary of Certain Liabilities a	ary of S	Tota ched	al \$	\$ 7,746.00

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B6F (Official Form 6F) (12/07) - Cont.

In re	Joseph	Thurman	and	Anna	L.	Thurman	
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Case No._

Debtor(s)

(if known)

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

<u></u>	_,		(Continuation Sheet)		,	,	
Creditor's Name, Mailing Address including Zip Code, And Account Number (See instructions above.)	Co-Debtor	JJ	Date Claim was Incurred, and Consideration for Claim. If Claim is Subject to Setoff, so State. Husband Wife oint Community	Contingent	Unliquidated	Disputed	Amount of Claim
Account No: 8223 Creditor # : 11 Target PO Box 59231 Minneapois MN 55459-0231		J	2/2006 Credit Card Purchases				\$ 12,749.00
Account No: 0112 Creditor # : 12 Revenue Production Managment, PO Box 925 Rosemont IL 60018-0925		J	1/2006 Credit Card Purchases				\$ 107.00
Account No: 0015 Creditor # : 13 Revenue Production Managment, PO Box 925 Rosemont IL 60018-0925		J	12/2005 Credit Card Purchases				\$ 50.00
Account No: 3942 Creditor # : 14 The Home Depot PO BOx 689100 Des Moines IA 50368		J	1/2006 Credit Card Purchases				\$ 6,394.00
Account No: 4325 Creditor # : 15 Women for Women 6438 N Central Chicago IL 60646		W	07 Medical				\$ 49.00
Account No:							
Sheet No. 2 of 2 continuation sheets attac Creditors Holding Unsecured Nonpriority Claims	hed t	o Sc	hedule of (Use only on last page of the completed Schedule F. Report also on Sum and, if applicable, on the Statistical Summary of Certain Liabilities	mary of S	Tota	al \$ ules	\$ 19,349.00 \$ 51,036.00

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n re	Joseph	Thurman	and Anna	L.	Thurman	/ Debtor	Ca	se No.		
						=		_	(if kno	own)

SCHEDULE G-EXECUTORY CONTRACTS AND UNEXPIRED LEASES

Describe all executory contracts of any nature and all unexpired leases of real or personal property. Include any timeshare interests. State the nature of debtor's interests in contract, i.e., "Purchaser," "Agent," etc. State whether debtor is the lessor or lessee of a lease. Provide the names and complete mailing addresses of all other parties to each lease or contract described. If a minor child is a party to one of the leases or contracts, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

□ Check this box if the debtor has no executory contracts or unexpired leases.

Name and Mailing Address, Including Zip Code, of Other Parties to Lease or Contract.	Description of Contract or Lease and Nature of Debtor's Interest. State whether Lease is for Nonresidential Real Property. State Contract Number of any Government Contract.

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In re	Joseph	Thurman	and Anna	L.	Thurman	/ Debtor	Case No.	
								(if known)

SCHEDULE H-CODEBTORS

Provide the information requested concerning any person or entity, other than a spouse in a joint case, that is also liable on any debts listed by the debtor in the schedules of creditors. Include all guarantors and co-signers. If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within the eight year period immediately preceding the commencement of the case, identify the name of the debtors spouse and of any former spouse who resides or resided with the debtor in the community property state, commonwealth, or territory. Include all names used by the nondebtor spouse during the eight years immediately preceding the commencement of this case. If a minor child is a codebtor or a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

□ Check this box if the debtor has no codebtors.

Name and Address of Codebtor	Name and Address of Creditor

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nre Joseph Thurman and Anna L. Thurman	_ ,	Case No.	
Debtor(s)			(if known)

SCHEDULE I - CURRENT INCOME OF INDIVIDUAL DEBTOR(S)

The column labeled "Spouse" must be completed in all cases filed by joint debtors and by every married debtor, whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed. Do not state the name of any minor child. The average monthly income calculated on this form may differ from the current monthly income calculated on Form 22A, 22B, or 22C.

Debtor's Marital	DEPENDENTS OF D	DEBTOR AND SPOUSE					
Status: <i>Married</i>	RELATIONSHIP(S): son daughter	AGE(S): 18 16					
EMPLOYMENT:	DEBTOR		SPO	USE			
Occupation	Unemployed	reo sp	ecialist				
Name of Employer		Pierce	& Assoc				
How Long Employed		8 yrs					
Address of Employer		_	arborn o IL 60602				
INCOME: (Estimate of av	rerage or projected monthly income at time case filed)		DEBTOR		SPOUSE		
 Monthly gross wages, Estimate monthly over 	salary, and commissions (Prorate if not paid monthly) time	\$ \$	0.00 0.00	\$	4,160.00 0.00		
SUBTOTAL LESS PAYROLL DEDI a. Payroll taxes and s b. Insurance c. Union dues		\$	0.00 0.00 0.00 0.00	\$ \$	4,160.00 942.50 223.1 0.00		
	transit pass	\$	0.00	*	86.6		
5. SUBTOTAL OF PAYR	OLL DEDUCTIONS	\$	0.00	\$	1,252.3		
6. TOTAL NET MONTHL	Y TAKE HOME PAY	\$	0.00	т	2,907.6		
8. Income from real prop 9. Interest and dividends 10. Alimony, maintenanc of dependents listed above	e or support payments payable to the debtor for the debtor's use or that ve.	8888	0.00 0.00 0.00 0.00	\$ \$	0.00 0.00 0.00 0.00		
11. Social security or gov (Specify): <i>unemp1c</i>12. Pension or retiremen13. Other monthly income	ymnet tincome	\$ \$	2,312.00 0.00		0.00		
(Specify):		\$	0.00	\$	0.00		
14. SUBTOTAL OF LINE	S 7 THROUGH 13	\$	2,312.00	\$	0.00		
15. AVERAGE MONTHL	Y INCOME (Add amounts shown on lines 6 and 14)	\$	2,312.00	\$	2,907.6		
16. COMBINED AVERAG	SE MONTHLY INCOME: (Combine column totals		\$	5,21	19.67		
from line 15; if there is	only one debtor repeat total reported on line 15)	, ,	also on Summary of Socal Summary of Certain		s and, if applicable, on ies and Related Data)		

17. Describe any increase or decrease in income reasonably anticipated to occur within the year following the filing of this document:

In re Joseph	h Thurman an	nd Anna L.	Thurman	_, Case No	
		Debto	r(s)		(if known)

SCHEDULE J-CURRENT EXPENDITURES OF INDIVIDUAL DEBTOR

Complete this schedule by estimating the average or projected monthly expenses of the debtor and the debtor's family. Prorate any payments made bi-weekly, quarterly, semi-annually, or annually to show monthly rate. The average monthly expenses calculated on this form may differ from the deductions from income allowed on Form 22 A or 22C.

☐ Check this box if a joint petition is filed and debtor's spouse maintains a separate household. Complete a separate schedule of expenditures labeled "Spouse."

	1	
Rent or home mortgage payment (include lot rented for mobile home)	\$	1,887.00
a. Are real estate taxes included? Yes 🛛 No 🗌		
b. Is property insurance included? Yes 🛛 No 🗌		
2. Utilities: a. Electricity and heating fuel	\$	500.00
b. Water and sewer	\$	30.00
c. Telephone d. Other internet	\$	165.00
own goll phone	\$	60.00
Other cell phone	\$	185.00
		25.22
3. Home maintenance (repairs and upkeep)	\$	85.00
4. Food	\$	500.00
5. Clothing	\$	200.00
6. Laundry and dry cleaning	\$	80.00
7. Medical and dental expenses	\$	85.00
8. Transportation (not including car payments)	\$	200.00
Recreation, clubs and entertainment, newspapers, magazines, etc.	\$	0.00
10. Charitable contributions	\$	0.00
11. Insurance (not deducted from wages or included in home mortgage payments)		
a. Homeowner's or renter's	\$	0.00
b. Life	\$	70.00
c. Health	\$	0.00
d. Auto	\$	150.00
e. Other	\$	0.00
Other	\$	0.00
12. Taxes (not deducted from wages or included in home mortgage)		
(Specify)	\$	0.00
13. Installment payments: (In chapter 11, 12, and 13 cases, do not list payments to be included in the plan)	Ť	
a. Auto	\$	0.00
b. Other: second mortgage	\$	500.00
c. Other: time share	\$	193.00
14. Alimony, maintenance, and support paid to others	\$	0.00
15. Payments for support of additional dependents not living at your home	\$	0.00
16. Regular expenses from operation of business, profession, or farm (attach detailed statement)	\$	0.00
17. Other: tuition Guerin	\$	700.00
Other:	\$	0.00
	***************************************	0.00
18. AVERAGE MONTHLY EXPENSES Total lines 1-17. Report also on Summary of Schedules	\$	5,590.00
	Ψ	
and, if applicable, on the Statistical Summary of Certain Liabilities and Related Data.)		
19. Describe any increase or decrease in expenditures reasonably anticipated to occur within the year following the filing of this document:		
20. STATEMENT OF MONTHLY NET INCOME		
a. Average monthly income from Line 16 of Schedule I	\$	5,219.67
b. Average monthly expenses from Line 18 above	\$	5,590.00
c. Monthly net income (a. minus b.)	\$	(370.33)
,	Ť	

UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS EASTERN DIVISION

In re <i>Joseph</i>	Thurman	hurman and Anna L. Thurman						Case No.).		
								Chapter	7		
							/ Debtor				

SUMMARY OF SCHEDULES

Indicate as to each schedule whether that schedule is attached and state the number of pages in each. Report the totals from Schedules A, B, D, E, F, I, and J in the boxes provided. Add the amounts from Schedules A and B to determine the total amount of the debtor's assets. Add the amounts of all claims from Schedules D, E, and F to determine the total amount of the debtor's liabilities. Individual debtors must also complete the "Statistical Summary of Certain Liabilities and Related Data"if they file a case under chapter 7, 11, or 13.

NAME OF SCHEDULE	Attached (Yes/No)	No. of Sheets	ASSETS	LIABILITIES	OTHER
A-Real Property	Yes	1	\$ 303,000.00		
B-Personal Property	Yes	3	\$ 16,220.00		
C-Property Claimed as Exempt	Yes	1			
D-Creditors Holding Secured Claims	Yes	2		\$ 264,499.00	
E-Creditors Holding Unsecured Priority Claims (Total of Claims on Schedule E)	Yes	1		\$ 0.00	
F-Creditors Holding Unsecured Nonpriority Claims	Yes	3		\$ 51,036.00	
G-Executory Contracts and Unexpired Leases	Yes	1			
H-Codebtors	Yes	1			
I-Current Income of Individual Debtor(s)	Yes	1			\$ 5,219.67
J-Current Expenditures of Individual Debtor(s)	Yes	1			\$ 5,590.00
тот	AL	15	\$ 319,220.00	\$ 315,535.00	

UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS EASTERN DIVISION

In re <i>Joseph</i>	Thurman	and	Anna	L.	Thurman					
							Chapter	7		
						/ Debtor				

STATISTICAL SUMMARY OF CERTAIN LIABILITIES AND RELATED DATA (28 U.S.C § 159)

If you are an individual debtor whose debts are primarily consumer debts, as defined in § 101(8) of the Bankruptcy Code (11 U.S.C. § 101(8), filing a case under chapter 7, 11, or 13, you must report all information requested below.

Check this box if you are an individual debtor whose debts are NOT primarily consumer debts. You are not required to report any information here.

This information is for statistical purposes only under 28 U.S.C. § 159.

Summarize the following types of liabilities, as reported in the Schedules, and total them.

Type of Liability	Amount
Domestic Support Obligations (from Schedule E)	\$ 0.00
Taxes and Certain Other Debts Owed to Governmental Units (from Schedule E)	\$ 0.00
Claims for Death or Personal Injury While Debtor Was Intoxicated (from Schedule E) (whether disputed or undisputed)	\$ 0.00
Student Loan Obligations (from Schedule F)	\$ 0.00
Domestic Support, Separation Agreement, and Divorce Decree Obligations Not Reported on Schedule E	\$ 0.00
Obligations to Pension or Profit-Sharing, and Other Similar Obligations (from Schedule F)	\$ 0.00
TOTAL	\$ 0.00

State the following:

Average Income (from Schedule I, Line 16)	\$ 5,219.67
Average Expenses (from Schedule J, Line 18)	\$ 5,590.00
Current Monthly Income (from Form 22A Line 12; OR, Form 22B Line 11; OR, Form 22C Line 20)	\$ 4,160.00

State the following:

1. Total from Schedule D, "UNSECURED PORTION, IF ANY" column		\$ 288.00
2. Total from Schedule E, "AMOUNT ENTITLED TO PRIORITY" column	\$ 0.00	
3. Total from Schedule E, "AMOUNT NOT ENTITLED TO PRIORITY, IF ANY" column		\$ 0.00
4. Total from Schedule F		\$ 51,036.00
5. Total of non-priority unsecured debt (sum of 1, 3, and 4)		\$ 51,324.00

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In re	Joseph Thurman and Anna L.	Thurman	Case No.	
		Debtor		(if known)

DECLARATION CONCERNING DEBTOR'S SCHEDULES

DECLARATION UNDER PENALTY OF PERJURY BY AN INDIVIDUAL DEBTOR

	e under penalty of perjury that I have read the f to the best of my knowledge, information and b	oregoing summary and schedules, consisting of elief.	16 sheets, and that they are true and
Date:	12/11/2006	Signature /s/ Joseph Thurman Joseph Thurman	
Date:	12/11/2006	Signature /s/ Anna L. Thurman Anna L. Thurman	
		[If joint case, both spouses must sign.]	

Penalty for making a false statement or concealing property: Fine of up to \$500,000 or imprisonment for up to 5 years or both. 18 U.S.C. §§ 152 and 3571.

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In re: Joseph Thurman and Anna L. Thurman

Case No.

STATEMENT OF FINANCIAL AFFAIRS

This statement is to be completed by every debtor. Spouses filing a joint petition may file a single statement on which the information for both spouses is combined. If the case is filed under chapter 12 or chapter 13, a married debtor must furnish information for both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed. An individual debtor engaged in business as a sole proprietor, partner, family farmer, or self-employed professional, should provide the information requested on this statement concerning all such activities as well as the individual's personal affairs. To indicate payments, transfers and the like to minor children, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not diclose the child's name. See, 11 U.S.C. § 112 and Fed. R. Bankr. P. 1007(m).

Questions 1-18 are to be completed by all debtors. Debtors that are or have been in business, as defined below, also must complete Questions 19-25. If the answer to an applicable question is "None," mark the box labeled "None." If additional space is needed for the answer to any question, use and attach a separate sheet properly identified with the case name, case number (if known), and the number of the question.

DEFINITIONS

"In business." A debtor is "in business" for the purpose of this form if the debtor is a corporation or partnership. An individual debtor is "in business" for the purpose of this form if the debtor is or has been, within the six years immediately preceding the filing of this bankruptcy case, any of the following: an officer, director, managing executive, or owner of 5 percent or more of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership; a sole proprietor or self-employed full-time or part-time. An individual debtor my also be "in business" for the purpose of this form if the debtor engages in a trade, business, or other activity, other than as an employee, to supplement income from the debtor's primary employment.

"Insider." The term "insider" includes but is not limited to: relatives of the debtor; general partners of the debtor and their relatives; corporations of which the debtor is an officer, director, or person in control; officers, directors, and any owner of 5 percent or more of the voting or equity securities of a corporation debtor and their relatives; affiliates of the debtor and insiders of such affiliates; any managing agent of the debtor. 11 U.S.C. §101.

1. Income from employment or operation of business

State the gross amount of income the debtor has received from employment, trade, or profession, or from operation of the debtor's business, including part-time activities either as an employee or in independent trade or business, from the beginning of this calendar year to the date this case was commenced. State also the gross amounts received during the two years immediately preceding this calendar year. (A debtor that maintains, or has maintained, financial records on the basis of a fiscal rather than a calendar year may report fiscal year income. Identify the beginning and ending dates of the debtor's fiscal year.) If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income of both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT SOURCE

Year to date: 6000 wages, unemployment

Last Year: 90000 Year before: 108640

2. Income other than from employment or operation of business

None State the amount of income received by the debtor other than from employment, trade, profession, operation of the debtor's business during the two years immediately preceding the commencement of this case. Give particulars. If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income for each spouse whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT SOURCE

Year to date:0 Year before:0 Form 7 (12/07) Case 09-04702 Doc 1 Filed 02/13/09 Entered 02/13/09 15:16:15 Desc Main Document Page 32 of 41

3. Payments to creditors

None

Complete a. or b., as appropriate, and c.

a. Individual or joint debtor(s) with primarily consumer debts: List all payments on loans, installment purchases of goods or services, and other debts to any creditor, made within 90 days immediately preceding the commencement of this case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$600. Indicate with an asterisk (*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and creditor counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

None

b. Debtor whose debts are not primarily consumer debts: List each payment or other transfer to any creditor made within 90 days immediately preceding the commencement of this case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$5,475. If the debtor is an individual, indicate with an asterisk (*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and creditor counseling agency. (Married debtors filingunder chapter 12 or chapter 13 must include payments and other transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

None

c. All debtors: List all payments made within one year immediately preceding the commencement of this case to or for the benefit of creditors who are or were insiders. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

4. Suits and administrative proceedings, executions, garnishments and attachments

None

a. List all suits and administrative proceedings to which the debtor is or was a party within one year immediately preceding the filing of this bankruptcy case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

None

b. Describe all property that has been attached, garnished or seized under any legal or equitable process within one year immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

5. Repossessions, foreclosures and returns

None

List all property that has been repossessed by a creditor, sold at a foreclosure sale, transferred through a deed in lieu of foreclosure or returned to the seller, within one year immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

6. Assignments and receiverships

None

a. Describe any assignment of property for the benefit of creditors made within 120 days immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include any assignment by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

None

b. List all property which has been in the hands of a custodian, receiver, or court-appointed official within one year immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

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7. Gifts

None \boxtimes

List all gifts or charitable contributions made within one year immediately preceding the commencement of this case except ordinary and usual gifts to family members aggregating less than \$200 in value per individual family member and charitable contributions aggregating less than \$100 per recipient. (Married debtors filing under chapter 12 or chapter 13 must include gifts or contributions by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

8. Losses

None \boxtimes

List all losses from fire, theft, other casualty or gambling within one year immediately preceding the commencement of this case or since the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include losses by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

9. Payments related to debt counseling or bankruptcy

None

List all payments made or property transferred by or on behalf of the debtor to any persons, including attorneys, for consultation concerning debt consolidation, relief under the bankruptcy law or preparation of a petition in bankruptcy within one year immediately preceding the commencement of this case.

NAME AND ADDRESS OF PAYEE

DATE OF PAYMENT. AMOUNT OF MONEY OR NAME OF PAYER IF OTHER THAN DEBTOR DESCRIPTION AND VALUE OF PROPERTY

Payee: Beth A. Lehman

Date of Payment:

Payor: Joseph Thurman

\$990.00

6 East Monroe

Address:

Suite 1004

Chicago, IL 60603

10. Other transfers

None \boxtimes

a. List all other property, other than property transferred in the ordinary course of the business or financial affairs of the debtor, transferred either absolutely or as security within two years immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

None \boxtimes

b. List all property transferred by the debtor within ten years immediately preceding the commencement of this case to a self-settled trust or similar device of which the debtor is a benificiary

11. Closed financial accounts

None \boxtimes

List all financial accounts and instruments held in the name of the debtor or for the benefit of the debtor which were closed, sold, or otherwise transferred within one year immediately preceding the commencement of this case. Include checking, savings, or other financial accounts, certificates of deposit, or other instruments; shares and share accounts held in banks, credit unions, pension funds, cooperatives, associations, brokerage houses and other financial institutions. (Married debtors filing under chapter 12 or chapter 13 must include information concerning accounts or instruments held by or for either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

12. Safe deposit boxes

None \boxtimes

List each safe deposit or other box or depository in which the debtor has or had securities, cash, or other valuables within one year immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include boxes or depositories of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

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13. Setoffs

None

List all setoffs made by any creditor, including a bank, against a debt or deposit of the debtor within 90 days preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

14. Property held for another person

None

List all property owned by another person that the debtor holds or controls.

15. Prior address of debtor

None

If the debtor has moved within three years immediately preceding the commencement of this case, list all premises which the debtor occupied during that period and vacated prior to the commencement of this case. If a joint petition is filed, report also any separate address of either spouse.

16. Spouses and Former Spouses

None

If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within eight years immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state.

17. Environmental Information

None

For the purpose of this question, the following definitions apply:

"Environmental Law" means any federal, state, or local statute or regulation regulating pollution, contamination, releases of hazardous or toxic substances, wastes or material into the air, land, soil, surface water, groundwater, or other medium, including, but not limited to, statutes or regulations regulating the cleanup of these substances, wastes, or material.

"Site" means any location, facility, or property as defined under any Environmental Law, whether or not presently or formerly owned or operated by the debtor, including, but not limited to disposal sites.

"Hazardous Material" means anything defined as hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, or contaminant or similar termunder an Environmental Law:

a. List the name and address of every site for which the debtor has received notice in writing by a governmental unit that it may be liable or potentially liable under or in violation of an Environmental Law. Indicate the governmental unit, the date of the notice, and, if known, the Environmental Law:

None

None

 \boxtimes

b. List the name and address of every site for which the debtor provided notice to a governmental unit of a release of Hazardous Material. Indicate the governmental unit to which the notice was sent and the date of the notice.

c. List all judicial or administrative proceedings, including settlements or orders, under any Environmental Law, with respect to which the debtor is or was a party. Indicate the name and address of the governmental unit that is or was a party to the proceeding, and the docket number.

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18. Nature, location and name of business

None \boxtimes

a. If the debtor is an individual, list the names, addresses, taxpayer-identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was an officer, director, partner, or managing executive of a corporation, partner in a partnership, sole proprietor, or was self-employed in a trade, profession, or other activity either full- or part-time within six years immediately preceding the commencement of this case, or in which the debtor owned 5 percent or more of the voting or equity securities within six years immediately preceding the commencement of this case

If the debtor is a partnership, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all in which the debtor was a partner or owned 5 percent or more of the voting or equity securities, within six years immediately preceding the commencment of this case.

	•	list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all vas a partner or owned 5 percent or more of the voting or equity securities within six years immediately preceding the
None I	o. Identify any business listed in respons	e to subdivision a., above, that is "single asset real estate" as defined in 11 U.S.C. § 101.
[If comple	eted by an individual or individual and	d spouse]
	under penalty of perjury that I have re rue and correct.	ead the answers contained in the foregoing statement of financial affairs and any attachments thereto and that
Da	ate 2/13/2009	Signature /s/ Joseph Thurman of Debtor
Da	ate 2/13/2009	Signature /s/ Anna L. Thurman of Joint Debtor (if any)

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UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS EASTERN DIVISION

n re <i>Joseph</i>	Thurman	and	Anna	L.	Thurman		Case No.		
							Chapter	/	
						/ De	ebtor		

CHAPTER 7 INDIVIDUAL DEBTOR'S STATEMENT OF INTENTION

Part A - Debts Secured by property of the estate. (Part A must be completed for EACH debt which is secured by property of the estate. Attach additional pages if necessary.)

1ver Leaf Resort t: 21 River Bend #120 11as TX 75247 perty will be (check one) : ☐ Surrendered Retained Retaining the property, I intend to (check at least one) : ☐ Redeem the property ☐ Reaffirm the debt	ne share Sheridan IL
Departy will be (check one): ☐ Surrendered	
operty will be (check one): Surrendered Retained etaining the property, I intend to (check at least one): Redeem the property	
Surrendered Retained etaining the property, I intend to (check at least one): Redeem the property	
etaining the property, I intend to (check at least one) :	
etaining the property, I intend to (check at least one) :	
Redeem the property	
Reaffirm the debt	
Other. Explain	(for example, avoid lien using 11 U.S.C § 522 (f)).
operty is (check one) :	
☐ Not claimed as exempt	

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CHAPTER 7 INDIVIDUAL DEBTOR'S STATEMENT OF INTENTION

Property No. 2		
Creditor's Name :	Describe Property Securing I	Debt :
American Home Mortgage	residence	
PO Box 660029		
Dallas TX 75266 Property will be (check one):	I	
Surrendered Retained		
If retaining the property, I intend to (check at least one):		
Redeem the property		
Reaffirm the debt		
Other. Explain	(for examp	ole, avoid lien using 11 U.S.C § 522 (f)).
Property is (check one) :		
☐ Claimed as exempt ☐ Not claimed as	exempt	
Property No. 3		
Creditor's Name :	Describe Property Securing I	Debt :
Chase Manhattan Mtge	"	
PO Box 9001020		
Louisville KY 40290-1054 Property will be (check one):		
Surrendered Retained		
If retaining the property, I intend to (check at least one):		
Redeem the property		
Reaffirm the debt		
Other. Explain	(for examp	ole, avoid lien using 11 U.S.C § 522 (f)).
Property is (check one) :		
☐ Not claimed as	exempt	
Part B - Personal property subject to unexpired leases. (A if necessary.)	All three columns of Part B must be completed for each unexpir	ed lease. Attach additional pages
Property No. 1		
Lessor's Name:	Describe Leased Property:	Lease will be assumed pursuant to 11 U.S.C. § 365(p)(2):
		☐ Yes No
I declare under penalty of perjury that the above personal property subject to an unexpired lease	Signature of Debtor(s) e indicates my intention as to any property of my estate s e.	ecuring a debt and/or
Date: <u>2/13/2009</u>	Debtor: /s/ Joseph Thurman	
Date: 2/12/2000	laint Dahton /a / 3 T Mb	
Date: <u>2/13/2009</u>	Joint Debtor: /s/ Anna L. Thurman	

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UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS EASTERN DIVISION

In re Joseph	Thurman	Case No.
and		Chapter
Anna L	Thurman	
		/ Debtor

Attorney for Debtor: Beth A. Lehman

VERIFICATION OF CREDITOR MATRIX

The above named Debtor(s) hereby verify that the attached list of creditors is true and correct to the best of our knowledge.

Date: 2/13/2009	/s/ Joseph Thurman
	Debtor
	/s/ Anna L. Thurman
	Joint Debtor

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American Home Mortgage Acct#: 1723 PO Box 660029

Dallas, TX 75266

Capital One POB 30285

SLC, UT 84130-0285

Chase

Acct#: 6755 PO Box 15298

Wilmington, DE 19850-5298

Chase Manhattan Mtge

Acct#: 6600 PO Box 9001020

Louisville, KY 40290-1054

Discover

Acct#: 6132 PO Box15192

Wilmington, DE 19850-5192

DrS Bonded

Acct#: 5103 PO Box 498609

Cincinnati, OH 45249-8609

Jacobson Orthodontic Associate

Acct#: 4333

4200 W. Peterson Ave Chicago, IL 60646

Kay Jewelers

Acct#: 6022

PO Box 740425

Cincinnati, OH 45274-0425

Menards
Acct#: 5159
PO Box 15521
Wilmington, DE 19850

Northwestern Medical Faculty F Acct#: 6913 38693 Eagle Way Chicago, IL 60678-1031

Northwestern Memorial Hospital Patient Financial 251 E Huron Chicago, IL 60611-2908

Parkview Dental Care Acct#: 4325 4020 N Central AVe Chicago, IL 60634

Retail Services
Acct#: 7781
POB 17298
Baltimore, MD 21297-1298

Target
Acct#: 8223
PO Box 59231
Minneapois, MN 55459-0231

Revenue Production Managment, Acct#: 0015 PO Box 925 Rosemont , IL 60018-0925

Revenue Production Managment, Acct#: 0112 PO Box 925 Rosemont , IL 60018-0925

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Silver Leaf Resort 1221 River Bend #120 Dallas, TX 75247

The Home Depot
Acct#: 3942
PO BOx 689100
Des Moines , IA 50368

Women for Women Acct#: 4325 6438 N Central Chicago, IL 60646